

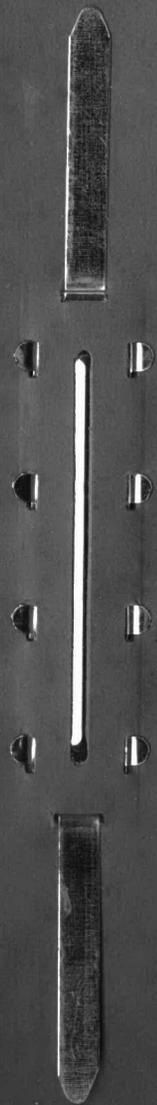
FILE FOLDER

DESCRIPTION ON TAB:

117 J.O. Completed

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Misc



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DESCRIPTION:

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BLDG NO
117

INT. PAINT SQ FT

EXT. PAINT SQ FT

ROOF SQ FT

CONDEN. LINES LIN FT

FACILITY HISTORY RECORD
MCBCL 11011/3

JOB ORDER NO	DATE COMPLETED Signed	COST	DESCRIPTION
NB4-04670-22	10/8/63	475.03	Renovate
NB4-04671-22043C	10/8/63	5.87	Paint exterior trim
Contract	12/10/69		Exterior repairs & paint
AAI-23-4242BT	2/26/71	1563	Repair & paint int.
5042	5-4-73	329	Rep & self help paint interior complete
3522	7-24-74	909	Rep & paint exterior
5826	1-28-77	O/E	rep water main
1230	4-16-76	423	Install (6) 120-volt duplex outlets
5826	12/29/76		Rep water main
3721	1-20-78	608	repl steam pit covers
Cont. # 79,2617	Fy 80	15,440	Replace roof
" 80-2011	8-25-80		Ext paint
N62470-78-C-8114	12-17-80	3512	Steam pit improvements for energy conservation
3957	5-9-80	233	Repair water dist line
3489	10-2-81	5134	Replace steam + condensate line
1083	8-27-82	2362	Remove wall, cut wall, install door, window Barr
3101	4-9-82	1756	Perform electrical repairs
3086	1-23-87	6,878	FABRICATE DOORS REMOVE & REINSTALL

BLDG CLASS 2 PROPERTY RECORD
 (004) UIC..M67001 (001) PR NO.....2-03985
 MCB CAMP LEJEUNE NC (005) FACILITY NO..117
 (106) SPEC AREA....DA
 HADNOT POINT

LOCATION
 (101) COUNTRY..US UNITED STATES
 (102) STATE....37 NORTH CAROLINA
 (103) COUNTY...133 ONSLOW
 (104) CITY.....0735 CAMP LEJEUNE
 (105) AC.....05
 (107) MAP GRID.8J

GENERAL INFORMATION
 (007) ACTION.....CAP-IMPROV
 (008) FAM HOUSING....NO
 (009) EE DATE.....06 OCT 81
 (011) PR REVIEW DATE.06 OCT 81
 (010) FACILITY NAME..
 ELEC/COMM MNT SHOP

ACQUISITION
 (201) ESTATE.....13 OTHER MIL FUND
 (202) ACQ CONTRACT...
 (203) ACQ DATE.....01 NOV 42
 (204) GOVT COST..... \$26,071
 (207) LAND CCN.....91140

MEASUREMENTS
 (301) LENGTH.... 101 FT
 (302) WIDTH..... 33 FT
 (303) HEIGHT.... 15 FT
 (304)/AREA..... 3,333 SF
 (308) AREA UM...
 (305) STORIES... 01
 (307) IRREGULAR. NO

CONSTRUCTION
 (401) YEAR BUILT.....1942
 (402) CONSTRUCTION TYPE..PERMANENT
 (403) YEAR IMPROVED.....

(404) ABMP CODE.....
 (409) PROJECT NO.....
 (410) HISTORIC IND...

MAINTENANCE
 (701) MAINT UIC..M67001 (702) PRIME USE....21710 (703) MFC...4 USMC

STATUS / UTILIZATION
 (502) CATEGORY CODE...21710 (501) USE..ELECNX/COMMS MAINT SHOP
 (510) USER UIC.....M67001.....MCB CAMP LEJEUNE NC

AREA/SF*	OTHER/	ALT/	DEF CODES
ADEQ(515)	(516)	(517)	(524)
SBST(518).....3,333.00	(519)	(520)	(525)B03 B04 B26
INAD(521)	(522)	(523)	(526)
TOTAL	3,333.00		

IND(21)	3,333.00	(22)	(22)
2BT(218).....	3,333.00	(219)	(220)
ADQ(215)	(216)	(217)	(224)
TOTAL	3,333.00	(223)	(226)

(210) USER UIC.....M7001.....MCR CAMP LEJUNE NC	AREA\S*	OTHER\	ALTA	DEF CODES
(202) CATEGORY CODE...2110				
(201) USE...ELEC\COMMS MAINT SHDP				
(201) MAINT UIC..M7001				
(705) PRIME USE...2110				
(703) MEC...4 USMC				

(403) YEAR IMPROVED.....	(401) YEAR BUILT.....1942	(404) ABMP CODE.....
(402) CONSTRUCTION TYPE..PERMANENT	(403) HISTORIC IND...	(402) PROJECT NO.....
(507) LAND CON.....0140	(307) IRREGULAR	(305) STORIES...
(504) GOVT COST.....\$20,011	(308) AREA UM...	(304) AREA.....
(503) ACQ DATE.....01 NOV 42	(303) HEIGHT....	(302) WIDTH....
(502) ACQ CONTRACT...	(301) LENGTH....	(101) FT
(501) ESTATE.....13 OTHER MIL FUND		

(107) MAP GRID..81	(102) AC.....02	(101) FACILITY NAME..
(104) CITY.....0735 CAMP LEJUNE	(103) COUNTY...113 GNSLOW	(101) PR REVIEW DATE..08 OCT 81
(103) COUNTY...113 GNSLOW	(102) STATE...37 NORTH CAROLINA	(100) EE DATE.....08 OCT 81
(101) COUNTRY..US	(101) UNITED STATES..	(007) ACTION.....CAP-IMPROV

(107) MAP GRID..81	(102) AC.....02	(101) FACILITY NAME..
(104) CITY.....0735 CAMP LEJUNE	(103) COUNTY...113 GNSLOW	(101) PR REVIEW DATE..08 OCT 81
(103) COUNTY...113 GNSLOW	(102) STATE...37 NORTH CAROLINA	(100) EE DATE.....08 OCT 81
(101) COUNTRY..US	(101) UNITED STATES..	(007) ACTION.....CAP-IMPROV

(107) MAP GRID..81	(102) AC.....02	(101) FACILITY NAME..
(104) CITY.....0735 CAMP LEJUNE	(103) COUNTY...113 GNSLOW	(101) PR REVIEW DATE..08 OCT 81
(103) COUNTY...113 GNSLOW	(102) STATE...37 NORTH CAROLINA	(100) EE DATE.....08 OCT 81
(101) COUNTRY..US	(101) UNITED STATES..	(007) ACTION.....CAP-IMPROV

(107) MAP GRID..81	(102) AC.....02	(101) FACILITY NAME..
(104) CITY.....0735 CAMP LEJUNE	(103) COUNTY...113 GNSLOW	(101) PR REVIEW DATE..08 OCT 81
(103) COUNTY...113 GNSLOW	(102) STATE...37 NORTH CAROLINA	(100) EE DATE.....08 OCT 81
(101) COUNTRY..US	(101) UNITED STATES..	(007) ACTION.....CAP-IMPROV

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DESCRIPTION:

Work Requests

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4th Marine Expeditionary Brigade (Anti-Terrorism)

03-13811

Requestor see instructions on Reverse

PART I --REQUEST (Filled out by Requestor) MEB1

1. FROM
 Commanding General 4th MEB (AT)

2. REQUEST NO. 2002 NOV -4 A 9: 19

3. TO
 Commanding General MCB CLNC (Attn Installations)

4. DATE OF REQUEST

5. REQUEST FOR
 COST ESTIMATE PERFORMANCE OF WORK

5a. REQUEST WORK START ASAP HRSC EAST

6. FOR FURTHER INFORMATION CALL
 Corporal Meggos 450-8608

7. SKETCH/PLAN ATTACHED 1

8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.)
 Location: NBC -117

Bldg. 117

Description: Sink has been busted in half

61
Plumb

Justification:

9. FUNDS CHARGEABLE

10. SIGNATURE *[Signature]*
 GySgt Tsang/B

PART II--COST ESTIMATE
 (Filled out by Maintenance Control Division if estimate requested)

11. TO

12. ESTIMATING

13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED	
		YES	NO
a. Labor	\$		
b. Material	\$	APPROVED	PROGRAMMING TO START IN
c. Overhead and/or Surcharge	\$	APPROVED	BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN
d. Equipment Rental/Usage	\$		AUTHORIZED BY 25TH OF [] AND FUNDS ARE MADE AVAILABLE.
e. Contingency	\$	DISAPPROVED	(See Reverse Side)
f. TOTAL	\$		

15. APPROVED. PROGRAMMING TO START IN []

16. SIGNATURE

17. DATE

PART III--ACTION (Filled out by Requestor)

18. TO

19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved)
 NAJCO DMPT 140 OTHER

20. WORK REQUESTED
 HAS BEEN CANCELED HAS BEEN DEFERRED WILL BE PERFORMED BY OTHER

21. SIGNATURE

22. DATE

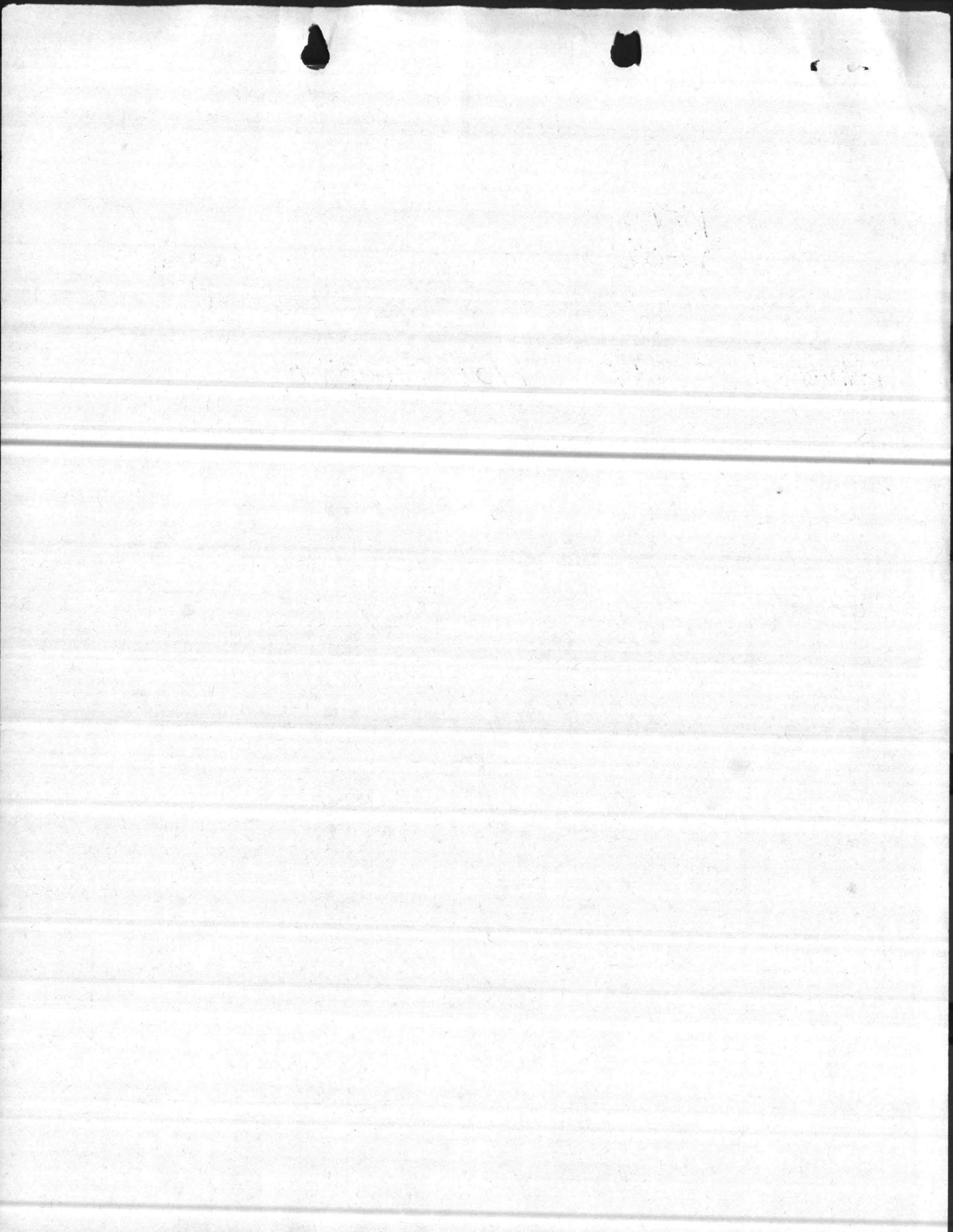
1981-80

PL-9 A-11-100 001

HRSC EAST

123 456

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*Received
May 21 2002*

4th Marine Expeditionary Brigade (Anti-Terrorism)

Requestor see Instructions on Reverse

PART I - REQUEST (Filled out by Requestor)		MEB1
1. FROM Commanding General 4th MEB (AT)		2. REQUEST NO. 02-032
3. TO Commanding General MCB CLNC (Attn Installations)		4. DATE OF REQUEST 5/21/02
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK		5a. REQUEST WORK START ASAP
6. FOR FURTHER INFORMATION CALL SSgt Beraguard 451-5738		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> <input checked="" type="checkbox"/> 1
8. DESCRIPTION OF WORK AND JUSTIFICATION <i>(Including location, type, size, quantity, etc.)</i> Location: Bldg 117 (4th MEB NBC)		

Description: We request to have (3) windows, that currently have bars on them be modified to accommodate 3 AC window units. There currently is a window that has an AC unit in it. We request to have the bars modified like the current one so that we can place (3) more in the building.

Justification: There currently is no central AC in building.

*RAE
Review*

**4TH MEB (AT)
G-4/FACILITIES ENDORSEMENT**
NAME *Jordan D. May*
DATE *May 21 2002*

9. FUNDS CHARGEABLE		10. SIGNATURE <i>(Requesting Official)</i> <i>Jordan D. May</i>	
PART II - COST ESTIMATE <i>(Filled out by Maintenance Control Division if estimate requested)</i>			
11. TO:		12. ESTIMATE NO.	
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED	
a. Labor		YES	NO
b. Material		APPROVED	PROGRAMMING TO START IN
c. Overhead and/or Surcharge		APPROVED	BASED ON PRESENT WORKLOAD, THIS JOB CAN BE
d. Equipment Rental/Usage			PROGRAMMED TO START IN
e. Contingency		DISAPPROVED. <i>(See Reverse Side)</i>	AUTHORIZED BY 25TH OF
f. TOTAL		16. SIGNATURE	17. DATE
PART III - ACTION (Filled out by Requestor)			
18. AUTHORIZATION TO PROCEED IS ATTACHED <i>(Check one if other than PW funds are involved)</i> NAVCOMPT 140 OTHER		20. WORK REQUESTED HAS BEEN HAS B BEEN WILL BE PERFORMED CANCELED DEFERRED BY OTHERS	
21. SIGNATURE		22. DATE	

(See Part IV on Reverse Side)

02-137504

ATH MED (M)
G-FACILITY
NAME
DATE

08-1304



UNITED STATES MARINE CORPS
MARINE CORPS BASE
PSC BOX 20004
CAMP LEJEUNE, NORTH CAROLINA 28542-0004

11380
IEPO
JUL 30 2002

From: Public Works Officer, Marine Corps Base, Camp Lejeune
To: Commanding General, 4th Marine Expeditionary Brigade,
Camp Lejeune (Attn: G-4)

Subj: APPROVAL OF REQUEST FOR AIR CONDITIONING

Ref: (a) BO 11380.4D
(b) MCO P11000.9C (NOTAL)

1. In accordance with reference (a), a Base Maintenance survey team visited Bldg 117 on 7/29/02 to determine the need and size of the requested air conditioners. Since the construction of the building is in compliance with the criteria in reference (b) for air conditioned spaces, your request is approved.

2. The following information is provided to procure the approved air conditioners from Base Property:

<u>Location</u>	<u>Quantity</u>	<u>Size</u>	<u>Voltage</u>
Bldg 117	3	24000 BTU	220
	1	10000 BTU	110

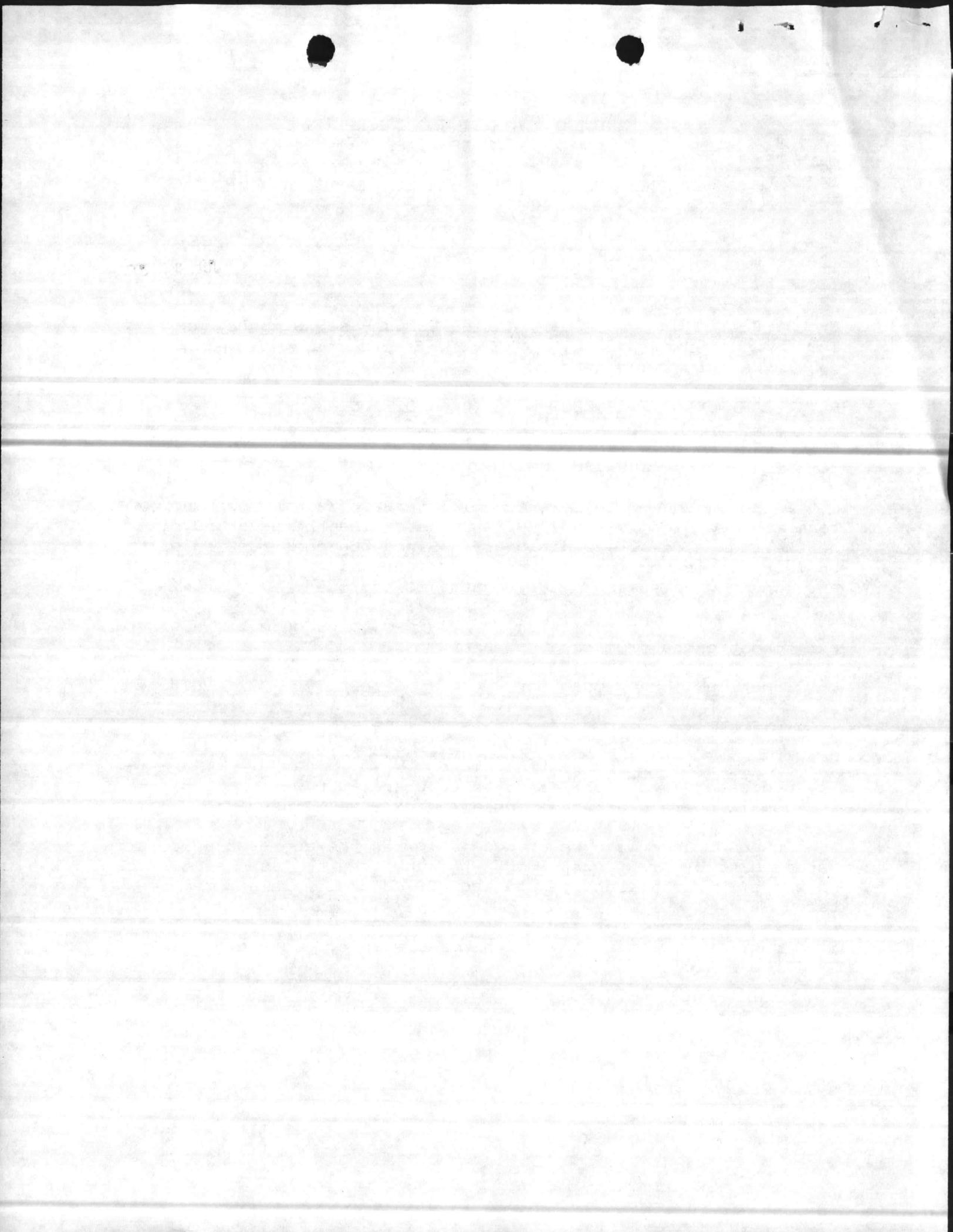
3. Dedicated electrical circuits to properly power the approved air conditioners need to be installed by Base Maintenance.

4. In accordance with reference (a), when the approved units are received, two work requests must be submitted to Base Maintenance to properly install and secure the air conditioners and remove bars

5. Should you require any further assistance, contact Mr. Nathan Wiggins at 451-0870.

E. W. Winberry

Copy to:
AC/S, I&E
Base Property



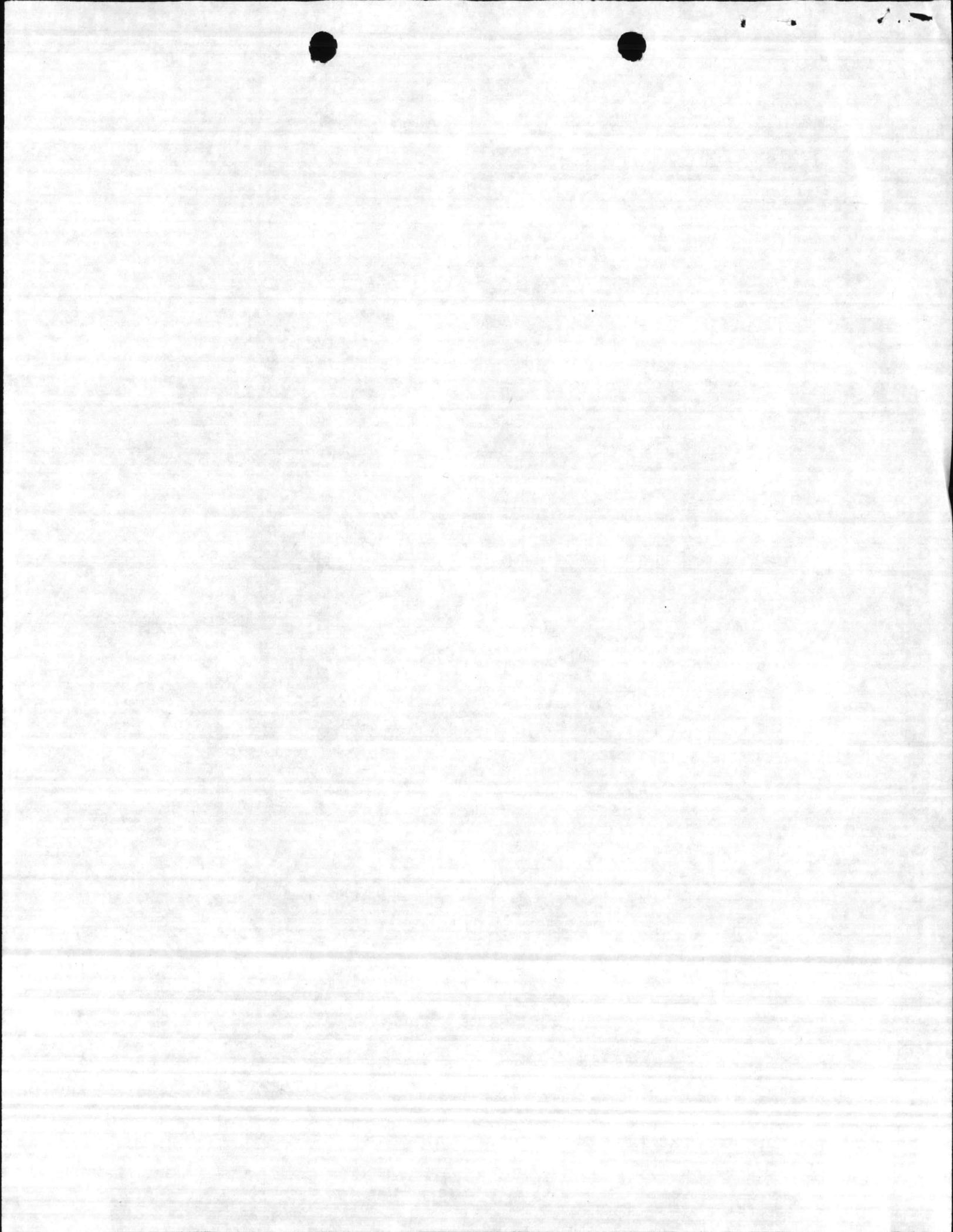
Subj: APPROVAL OF REQUEST FOR AIR CONDITIONING

Blind Copy to:
P&E (N. Wiggins)

→Work Reception
UMACS

Writer: E. Winberry, Ops, 451-1580

Typist: C. Marentis, 30Jul02, D:\Letters\ACApproved\Max02-137504



AIR CONDITIONING/HEAT PUMP APPROVAL
DATA CHECKLIST

To: STR AIR/Grd ORG UTS MARCON #4th Meb

Via: Call and Then will pick up letter
Attr S Sgt Beraguard Pl 451-5738

Work Request No: 02-032 02-137504

Date Inspected: 29 July 02 Building No. 117

Approved Unit: Heat Pump N/A Air Conditioner _____
14,500/15,800 BTU (220V/30A) _____
5,000 BTU/110V _____
10,000 BTU/110V 1 Ea
18,000 BTU/220V _____
24,000 BTU/220V 3 Each

Location: Classroom, Work Area, Test area, Office
Quantity: 4 Total

Unit to be Turned In: Heat Pump _____ Air Conditioner _____
Location: N/A
Size: _____ BTU
Serial No: _____ Voltage: _____

Repair Ticket Number(s) _____
has/have been submitted to:

- _____ Install a dedicated electrical circuit to properly power the approved unit.
- _____ Convert the existing dedicated electrical circuit to provide the proper power for the approved unit.
- _____ Install ceiling insulation in the area to be air conditioned to meet the requirements of DOD 4270.1M.
- _____ Prior to the procurement of the air conditioning unit, ceiling insulation must be installed by the facility occupant via the "Self Help" Program to allow the facility to comply with the requirements of DOD 4270.1M.
- Other (Please specify)

Ticket to repair Bars will be submitted
Ticket to wire two 24,000 BTU units will
be submitted when ELEC P&E can look

STR AIR/CRD ORG NTS MARK C.M.

Call a ...
After ...
02-032
02-131204

HTA

1 ...
3 ...
HTA ...

HTA

That ...
...
...

430
 4530 02 1330

4th Marine Expeditionary Brigade (Anti-Terrorism)

Requestor see Instructions on Reverse

PART I -REQUEST (Filled out by Requestor)		MEB 1
1. FROM Commanding General 4th Marine Expeditionary Brigade	2. REQUEST NO. 02-035	
3. TO Commanding General MCB (attn: Installations)	4. DATE OF REQUEST May 30 2002	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ASAP	
6. FOR FURTHER INFORMATION CALL SSgt Berragard 451-5738	7. SKETCH/PLAN ATTACHED <input type="checkbox"/> <input checked="" type="checkbox"/>	
8. DESCRIPTION OF WORK AND JUSTIFICATION <i>(Including location, type, size, quantity, etc.)</i> Location: Bldg 117		

DESCRIPTION : Request to have 2 air conditioning units LTI. This must be done so that the units can be brought to DRMO. The NSN for the a/c units is 4120009054225
 The NSN for the 2nd unit is 4120009054238

Justification: To provide a healthy and safe working environment

02-139737

9. FUNDS CHARGEABLE 8th Marines	10. SIGNATURE <i>(Requesting Official)</i> Jordan May/Sgt/USMC
---	--

PART II-COST ESTIMATE

(Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.
13. COST ESTIMATE	14. SKETCH/PLAN ATTACHED	
	YES	NO
a. Labor \$	15. APPROVED. PROGRAMMING TO START IN APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE PROGRAMMED TO START IN . IF AUTHORIZED BY 25TH OF AND FUNDS ARE MADE AVAILABLE. DISAPPROVED. <i>(See Reverse Side)</i>	
b. Material \$		
c. Overhead and/or Surcharge \$		
d. Equipment Rental/Usage \$		
e. Contingency \$		
f. TOTAL \$	16. SIGNATURE	17. DATE

PART III-ACTION (Filled out by Requestor)

18. TO:		20. WORK REQUESTED		
19. AUTHORIZATION TO PROCEED IS ATTACHED <i>(Check one if other than PW funds are involved)</i> NAVCOMPT 140 OTHER		HAS BEEN	HAS BEEN	WILL BE PERFORMED
		CANCELED	DEFERRED	BY OTHERS
21. SIGNATURE		22. DATE		

(See Part IV on Reverse Side)

1230-05-330

1230-05-330

02-153 007

4th Marine Expeditionary Brigade (Anti-Terrorism)

Requestor see Instructions on Reverse

PART I - REQUEST (Filled out by Requestor)		MEB1
1. FROM Commanding General 4th MEB (AT)	2. REQUEST NO. 02-013	
3. TO Commanding General MCB CLNC (Attn Installations)	4. DATE OF REQUEST 2/11/02	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ASAP	
6. FOR FURTHER INFORMATION CALL SSgt Beregard 451-5738	7. SKETCH/PLAN ATTACHED <input type="checkbox"/> <input checked="" type="checkbox"/>	
8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.) Location: Bldg 117 (4th MEB NBC)		

Panes

Description: We request to have 2 broken window panes (approx, 10"X18") replaced in the rear door.

43

Justification: For security reasons.

6-4 endorsed
43

RECEIVED

'02 FEB 25 AM 9 11

BASE MAINTENANCE
OPERATIONS DIVISION

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) Jordan D. May <i>Jordan May</i>
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PART II - COST ESTIMATE

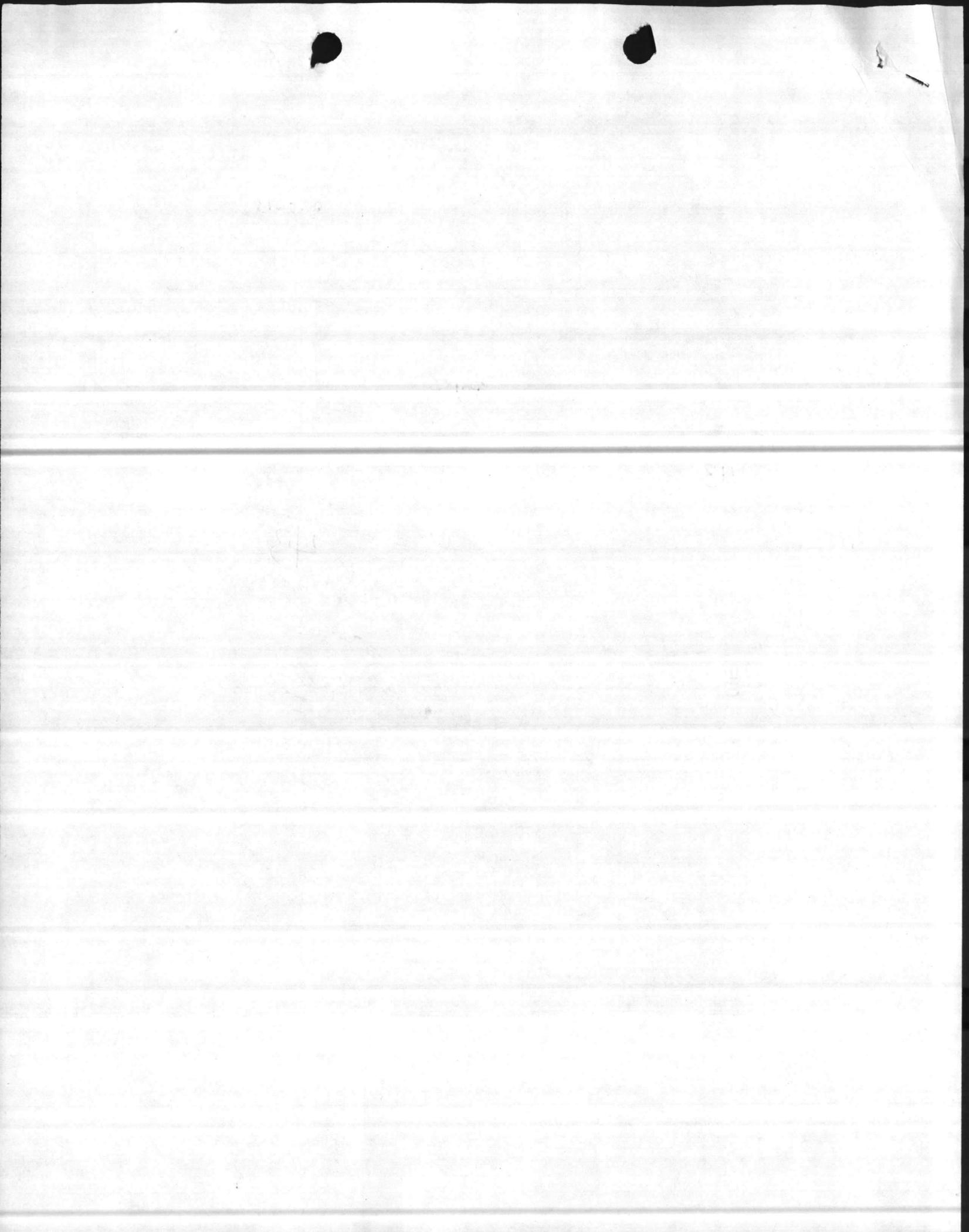
(Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED
		YES NO
a. Labor	\$	
b. Material	\$	APPROVED. PROGRAMMING TO START IN
c. Overhead and/ or Surcharge	\$	APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE
d. Equipment Rental/Usage	\$	PROGRAMMED TO START IN . IF
e. Contingency	\$	AUTHORIZED BY 25TH OF AND FUNDS
		ARE MADE AVAILABLE.
f. TOTAL	\$	DISAPPROVED. (See Reverse Side)
16. SIGNATURE		17. DATE

PART III - ACTION (Filled out by Requestor)

18. TO:	20. WORK REQUESTED		
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved)	HAS BEEN	HAS BEEN	WILL BE PERFORMED
NAVCOMPT 140 OTHER	CANCELED	DEFERRED	BY OTHERS
21. SIGNATURE	22. DATE		

(See Part IV on Reverse Side)



4th Marine Expeditionary Brigade (Anti-Terrorism)

RECEIVED
 Requestor see instructions on Reverse

PART I - REQUEST (Filled out by Requestor)		MEB1
1. FROM Commanding General 4th MEB (AT)	2. REQUEST NO. 02-007	
3. TO Commanding General MCB CLNC (Attn Installations)	4. DATE OF REQUEST 2/11/02	
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE <input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ASAP	
6. FOR FURTHER INFORMATION CALL SSGT Berragound 451 5738	7. SKETCH/PLAN ATTACHED <input checked="" type="checkbox"/> <input type="checkbox"/>	
8. DESCRIPTION OF WORK AND JUSTIFICATION (Including location, type, size, quantity, etc.) Location: Bldg 117 (4th MEB NBC)		

Description: Request to have the balast replaced or fixed shown on the attached diagram Base Maint recently came out and asked us to replace all light bulbs and we did and this is what we ended up with.

41

Justification: Proper maint of fac.

9. FUNDS CHARGEABLE	10. SIGNATURE (Requesting Official) Jordan D. May
---------------------	--

PART II - COST ESTIMATE

(Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.
13. COST ESTIMATE	14. SKETCH/PLAN ATTACHED	
	YES	NO
a. Labor \$	15.	
b. Material \$	APPROVED.	PROGRAMMING TO START IN
c. Overhead and/or Surcharge \$	APPROVED.	BASED ON PRESENT WORKLOAD, THIS JOB CAN BE
d. Equipment Rental/Usage \$		PROGRAMMED TO START IN . IF
		AUTHORIZED BY 25TH OF AND FUNDS
		ARE MADE AVAILABLE.
e. Contingency \$	DISAPPROVED.	(See Reverse Side)
f. TOTAL \$	16. SIGNATURE	17. DATE

PART III - ACTION (Filled out by Requestor)

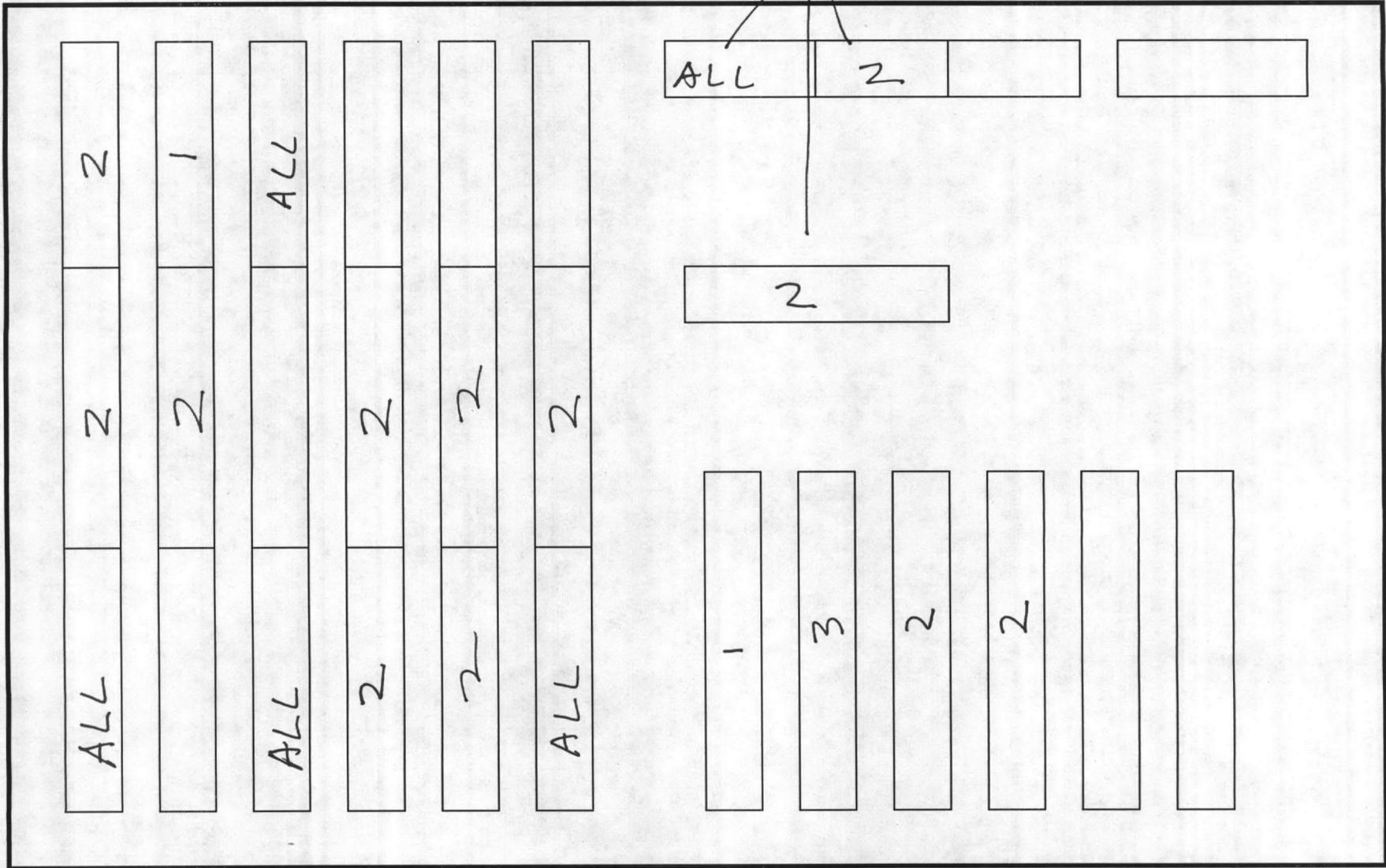
18. TO:		20. WORK REQUESTED		
19. AUTHORIZATION TO PROCEED IS ATTACHED (Check one if other than PW funds are involved)		HAS BEEN	HAS B BEEN	WILL BE PERFORMED
NAVCOMPT 140	OTHER	CANCELED	DEFERRED	BY OTHERS
21. SIGNATURE		22. DATE		

0011 6312

01810

2012 12 11 14:22

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Bldg 117-Light Fixture diagram

JJA

JJA

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JJA

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DZ-100044

4th Marine Expeditionary Brigade (Anti-Terrorism)

RECEIVED

PART I--REQUEST (Filled out by Requestor)		MEB1
1. FROM Commanding General 4th MEB (AT)		2. REQUEST NO. 02-008
3. TO Commanding General MCB CLNC (Attn Installations)		4. DATE OF REQUEST 2/11/02
5. REQUEST FOR <input type="checkbox"/> COST ESTIMATE	<input checked="" type="checkbox"/> PERFORMANCE OF WORK	5a. REQUEST WORK START ASAP
6. FOR FURTHER INFORMATION CALL SSgt Berraguard 451-5738		7. SKETCH/PLAN ATTACHED <input type="checkbox"/> <input checked="" type="checkbox"/> 1
8. DESCRIPTION OF WORK AND JUSTIFICATION <i>(Including location, type, size, quantity, etc.)</i> Location: Bldg 117 (4th MEB NBC)		

Description: Request to have broken and falling of door knob fixed on the door on the east side of building.

45

Justification: Proper maint of fac.

9. FUNDS CHARGEABLE	10. SIGNATURE <i>(Requesting Official)</i> Jordan D. May
---------------------	---

PART II--COST ESTIMATE

(Filled out by Maintenance Control Division if estimate requested)

11. TO:		12. ESTIMATE NO.
13. COST ESTIMATE		14. SKETCH/PLAN ATTACHED
a. Labor	\$	YES NO
b. Material	\$	APPROVED. PROGRAMMING TO START IN
c. Overhead and/or Surcharge	\$	APPROVED. BASED ON PRESENT WORKLOAD, THIS JOB CAN BE
d. Equipment Rental/Usage	\$	PROGRAMMED TO START IN , IF AUTHORIZED BY 25TH OF AND FUNDS ARE MADE AVAILABLE.
e. Contingency	\$	DISAPPROVED. <i>(See Reverse Side)</i>
f. TOTAL	\$	16. SIGNATURE 17. DATE

PART III--ACTION (Filled out by Requestor)

18. TO:		20. WORK REQUESTED		
19. AUTHORIZATION TO PROCEED IS ATTACHED <i>(Check one if other than PW funds are involved)</i>		HAS BEEN	HAS BEEN	WILL BE PERFORMED
NAVCOMPT 140 OTHER		CANCELED	DEFERRED	BY OTHERS
21. SIGNATURE		22. DATE		



NOV 15 11 55

OFFICE

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DESCRIPTION:

Contract Data

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TAB PLACEMENT HERE

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